

# UNOFFICIAL COPY



## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

Doc#: 1117939051 Fee: \$38.00  
Eugene "Gene" Moore RHSP Fee: \$10.00  
Cook County Recorder of Deeds  
Date: 06/28/2011 02:07 PM Pg: 1 of 2

A NAME & PHONE OF CONTACT AT FILER [optional]  
Phone: (800) 331-3282 Fax: (318) 662-4141

B SEND ACKNOWLEDGEMENT TO: (Name and Address) 15715 BANK FINANCIAL

CT Lien Solutions 28840056  
P.O. Box 29071  
Glendale, CA 91209-9071  
IL IL  
FIXTURE

File with: CC IL Cook+, IL

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S LAST NAME DONALD

1c. MAILING ADDRESS 903 SHERIDAN RD.

CITY WILMETTE STATE IL POSTAL CODE 60091 COUNTRY USA

1d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any  NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME 3731 N. CLARK STREET LLC

OR

2b. INDIVIDUAL'S LAST NAME

2c. MAILING ADDRESS 3731 N. CLARK ST., STE. 1

CITY CHICAGO STATE IL POSTAL CODE 60613 COUNTRY USA

2d. SEE INSTRUCTIONS ADD'L INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION LLC 2f. JURISDICTION OF ORGANIZATION IL 2g. ORGANIZATIONAL ID #, if any 03600017  NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME BANKFINANCIAL, F.S.B.

OR

3b. INDIVIDUAL'S LAST NAME

3c. MAILING ADDRESS 15W060 NORTH FRONTAGE ROAD

CITY BURR RIDGE STATE IL POSTAL CODE 60527 COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

All Equipment and Fixtures whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds) for Property. Address: 3731-3733 N. Clark St., Chicago, IL. 60613

11/2/11  
S R S M S E I N T

5. ALTERNATIVE DESIGNATION (if applicable)  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

6.  This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)  All Debtors  Debtor 1  Debtor 2 (optional) (ADDITIONAL FEE)

8. OPTIONAL FILER REFERENCE DATA  
28840056 KG 686 303 - 1902048755

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## FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S LAST NAME <b>DONALD</b>	FIRST NAME <b>LOTTON</b>	MIDDLE NAME, SUFFIX <b>W.</b>
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10 MISCELLANEOUS

**28840056-IL-31**

**15715 BANK FINANCIAL**

File with: CC IL Cook+, IL 303-1902048755 KG 686

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
11c. MAILING ADDRESS		CITY	STATE   POSTAL CODE   COUNTRY
11d. SEE INSTRUCTION	ADD'L INFO RE ORGANIZATION DEBTOR	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION
			11g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE

12.  ADDITIONAL SECURED PARTY'S of  ASSIGNOR S/P's NAME - insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME

OR

12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
12c. MAILING ADDRESS		CITY	STATE   POSTAL CODE   COUNTRY

13. This FINANCING STATEMENT covers  timber to be cut or  as-extracted collateral or is filed as a  fixture filing.

14. Description of real estate

Description: LOTS 12 AND 13 IN BLOCK 1 IN BUCKINGHAM'S 2ND ADDITION TO LAKE VIEW, A SUBDIVISION OF ALL BLOCK 11 AND PARTS OF BLOCKS 10 AND 12 (EXCEPT THE RAILROAD), OF LAFLIN SMITH AND DYER'S SUBDIVISION IN THE WEST 1/2 OF THE NORTHEAST 1/4 OF SECTION 20, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. Parcel ID: 14-20-215-012-0000

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

17. Check only if applicable and check only one box.  
Debtor is a  Trust or  Trustee acting with respect to property held in trust or  Decedent's Estate

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY

Filed in connection with a Manufactured-Home Transaction

Filed in connection with a Public-Finance Transaction